PHA Plans

Streamlined Annual Version

U.S. Department of Housing and **Urban Development**

OMB No. 2577-0226

 $(\exp. 05/31/2006)$

Office of Public and Indian Housing

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new

section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 2006

PHA Name: Greene Metropolitan

Housing Authority

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

form **HUD-50075-SA** (4/30/2003)

Streamlined Annual PHA Plan Agency Identification

| PHA Name: Greene Metro PHA Number: OH0 | • | Housing Authority | | |
|--|--|---------------------------------------|---|----------------------------|
| PHA Fiscal Year Beginnin | g: 04/20 | 006 | | |
| PHA Programs Administe Public Housing and Section Number of public housing units: Number of S8 units: | 8 Se | | ablic Housing Onler of public housing units | |
| □PHA Consortia: (check b | ox if subn | nitting a joint PHA P | lan and complete | table) |
| Participating PHAs | PHA Code | Program(s) Included in the Consortium | Programs Not in the Consortium | # of Units Each Program |
| Participating PHA 1: | | | | |
| Participating PHA 2: | | | | |
| Participating PHA 3: | | | | |
| PHA Plan Contact Inform Name: Susan Stiles TDD: 937-374-1607 | ation: | Phone: 937- Email (if ava | 376-2908 nilable): sstiles@gr | mha.net |
| Public Access to Informati Information regarding any acti (select all that apply) PHA's main administrative | ivities out | _ | be obtained by co | |
| Display Locations For PH | A Plans | and Supporting D | ocuments | |
| The PHA Plan revised policies of public review and inspection. If yes, select all that apply: Main administrative offic PHA development manag Main administrative offic Public library | Yes Yes The of the Property of the local section is a section of the local section in the local section is a section in the local sec | □ No. HA fices | | |
| PHA Plan Supporting Document Main business office of the | | | (select all that app) | |

Other (list below)

Streamlined Annual PHA Plan

Fiscal Year 2006

[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

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19-1

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20-1

Copies of any information not physically included with this document can be reviewed in the Main Office of the Greene Metropolitan Housing Authority.

| Α. | PHA | PI.A | N | CON | /PO | NEN | JTS |
|----|-----|------|---|-----|-----|-----|-----|
| | | | | | | | |

| | 1. Site-Based Waiting List Policies |
|------------------------|--|
| 903.7(b) |)(2) Policies on Eligibility, Selection, and Admissions |
| \boxtimes | 2. Capital Improvement Needs |
| 903.7(g) |) Statement of Capital Improvements Needed |
| \boxtimes | 3. Section 8(y) Homeownership |
| 903.7(k) |)(1)(i) Statement of Homeownership Programs |
| | 4. Project-Based Voucher Programs |
| $\overline{\boxtimes}$ | 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has |
| | changed any policies, programs, or plan components from its last Annual Plan. |
| \boxtimes | 6. Supporting Documents Available for Review |
| \boxtimes | 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, |
| | Annual Statement/Performance and Evaluation Report |
| \boxtimes | 8. Capital Fund Program 5-Year Action Plan |
| | |

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, <u>PHA Certifications of Compliance with the PHA Plans and Related Regulations:</u> <u>Board Resolution to Accompany the Streamlined Annual Plan</u> identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, *Certification for a Drug-Free Workplace*;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, Disclosure of Lobbying Activities.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year - Not Applicable

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.**NO**

| | | Site-Based Waiting l | Lists | |
|--|-------------------|---|--|--|
| Development Information: (Name, number, location) | Date Initiated | Initial mix of Racial, Ethnic or Disability Demographics | Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL | Percent change between initial and current mix of Racial, Ethnic, or Disability demographics |
| | | | | |
| | | | | |

| 2. | What is the nu at one time? | mber of site ba | ased waiting list devel | opments to which fam | ilies may apply |
|------------------------|-------------------------------|--|--|--|------------------|
| 3. | How many unbased waiting | • | n applicant turn down | before being removed | I from the site- |
| 4. | or any court or complaint and | rder or settleme describe how | ent agreement? If yes | nding fair housing com , describe the order, as iting list will not viola at below: | greement or |
| В. | Site-Based W | aiting Lists – | Coming Year - | Not Applicable | |
| of the | following ques | stions; if not, sl | kip to next componen | ng lists in the coming year. NOT APPLICABIE erate in the coming year. | Æ |
| 3. | | year (that is, the waiting list plants) If yes, how many | hey are not part of a pan)? any lists? s be on more than one | ased waiting lists new breviously-HUD-appro | |
| | | J = 1 , = 1 ==== | J | | |

| b [[[24 CF | ased waiting list PHA n All PH Manag At the Other (pital Impro | |
|---------------------------|--|---|
| Exemp | tions: Section | 8 only PHAs are not required to complete this component. |
| A. | Capital Fund | Program |
| 1. 🖂 | Yes No | Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B. |
| 2. | Yes No: | Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.). |
| В. | | d Public Housing Development and Replacement Activities (Non- |
| public | - | (As administering public housing. Identify any approved HOPE VI and/or opment or replacement activities not described in the Capital Fund Program |
| 1. | Yes No: | Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary). |
| 2. | Status of HO | PE VI revitalization grant(s): |
| | | HOPE VI Revitalization Grant Status |
| a. Deve | elopment Name | e: |
| | | |

| b. Development Num | ber: | | |
|--|---|--|--|
| Revitalizat Revitalizat | ion Plan under development ion Plan submitted, pending approval ion Plan approved oursuant to an approved Revitalization Plan underway | | |
| | oursulation and approved the transcation of the state of | | |
| 3. ☐ Yes ⊠ No: | Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below: | | |
| 4. ☐ Yes ⊠ No: | Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below: | | |
| 5. Yes No: Y | Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below: | | |
| | ant Based AssistanceSection 8(y) Homeownership Program FR Part 903.12(c), 903.7(k)(1)(i)] | | |
| 1. X Yes No: | Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.) | | |
| 2. Program Descripti | ion: | | |
| a. Size of Program ⊠ Yes □ No: | Will the PHA limit the number of families participating in the Section 8 homeownership option? | | |
| | If the answer to the question above was yes, what is the maximum number of participants this fiscal year? No more than 1% of vouchers utilized at any one time. | | |
| b. PHA-established eligibility criteria Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria: | | | |
| c. What actions will the PHA undertake to implement the program this year (list)? | | | |

PHA Name: Greene Metropolitan Housing Authority

HA Code: OH022

Section 8 Supervisor/Acting Assistant Director will attend training so that the program can be implemented. Additional procedures will be established and published. The Homeowner program will be advertised to current program participants.

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

| The I | PHA has demonstrated its capacity to administer the program by (select all that apply): |
|-------------|---|
| \boxtimes | Establishing a minimum homeowner down payment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the |
| | family's resources. |
| | Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with |
| | secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards. |
| | Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below): Ohio State University Extension Office – Greene |
| | County, Greene County Department of Development - Homebuyers |
| \boxtimes | Demonstrating that it has other relevant experience (list experience below): |
| | GMHA through its closely held non-profit develops housing for low and moderate- |
| | income families and individuals. It has experience working with the Ohio State |
| | University Extension Office, which provides financial literacy classes and financial |
| | counseling. The non-profit also works closely with the Greene County Department of |
| | Development. A number of local lenders work with the non-profit to provide mortgage |
| | assistance to the low and moderate-income homebuyers. |
| | |
| <u>4. U</u> | Jse of the Project-Based Voucher Program |
| Inte | nt to Use Project-Based Assistance |
| | Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in oming year? If the answer is "no," go to the next component. If yes, answer the following tions. |
| 1 | . Yes No: Are there circumstances indicating that the project basing of the units, |
| • | rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply: |
| | low utilization rate for vouchers due to lack of suitable rental units access to neighborhoods outside of high poverty areas other (describe below:) |
| 2 | . Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts): |

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

 ∇

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

- 1. Consolidated Plan jurisdiction: (provide name here)City of Xenia, City of Fairborn, Greene County, and State of Ohio
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

| \triangle | The PHA has based its statement of needs of families on its waiting lists on the needs |
|-------------|---|
| | expressed in the Consolidated Plan/s. |
| \boxtimes | The PHA has participated in any consultation process organized and offered by the |
| | Consolidated Plan agency in the development of the Consolidated Plan. |
| \boxtimes | The PHA has consulted with the Consolidated Plan agency during the development of |
| | this PHA Plan. |
| \boxtimes | Activities to be undertaken by the PHA in the coming year are consistent with the |
| | initiatives contained in the Consolidated Plan. (list below) |
| | Operate a Section 8 Housing Choice Voucher Program and Public Housing Program that |
| | provide housing for low income families and individual; operate a Capital Fund Program |
| | that maintains viability of public housing units and increases energy efficiency; operate |
| | an Individual Development Program that provides matched savings accounts for home |
| | purchase, business capitalization, or post secondary education. |
| | Other: (list below) |
| | |

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

Funds are not committed through the Consolidated Plan. The Consolidated Plan states the need for affordable housing, average cost of housing are out-of-reach for low income families and individuals, appropriateness of dwellings, housing and social mix, tenure choice, location of housing, quality of environmental planning and design, and cost. Tenant-based rental assistance is ranked number 3 as a priority for countywide housing needs.

<u>6. Supporting Documents Available for Review for Streamlined Annual PHA Plans</u>

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

| | List of Supporting Documents Available for Review | |
|------------|---|--|
| Applicable | Supporting Document | Related Plan Component |
| & On | | |
| Display | PHA Certifications of Compliance with the PHA Plans and Related Regulations | 5 Year and Annual Plans |
| | and Board Resolution to Accompany the Standard Annual, Standard Five-Year, | 3 Tear and Annual Plans |
| | and Streamlined Five-Year/Annual Plans; | |
| X | and streething the real/random random | |
| | PHA Certifications of Compliance with the PHA Plans and Related Regulations | Streamlined Annual Plans |
| X | and Board Resolution to Accompany the Streamlined Annual Plan | |
| | Certification by State or Local Official of PHA Plan Consistency with | 5 Year and standard Annual |
| | Consolidated Plan. | Plans |
| | Fair Housing Documentation Supporting Fair Housing Certifications: Records | 5 Year and Annual Plans |
| | reflecting that the PHA has examined its programs or proposed programs, | |
| | identified any impediments to fair housing choice in those programs, addressed | |
| | or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to | |
| X | implement any of the jurisdictions' initiatives to affirmatively further fair | |
| 11 | housing that require the PHA's involvement. | |
| | Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in | Annual Plan: |
| | which the PHA is located and any additional backup data to support statement of | Housing Needs |
| | housing needs for families on the PHA's public housing and Section 8 tenant- | |
| X | based waiting lists. | |
| | Most recent board-approved operating budget for the public housing program | Annual Plan: |
| X | DILL III II | Financial Resources |
| | Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), | Annual Plan: Eligibility, |
| X | which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure. | Selection, and Admissions Policies |
| Α | Deconcentration Income Analysis | Annual Plan: Eligibility, |
| | Deconcentration meome ranarysis | Selection, and Admissions |
| X | | Policies |
| | Any policy governing occupancy of Police Officers and Over-Income Tenants in | Annual Plan: Eligibility, |
| | Public Housing. Check here if included in the public housing A&O Policy. | Selection, and Admissions |
| X | | Policies |
| | Section 8 Administrative Plan | Annual Plan: Eligibility, |
| *** | | Selection, and Admissions |
| X | Public housing rent determination policies, including the method for setting | Policies Annual Plan: Rent |
| | public housing flat rents. | Determination |
| X | ☐ Check here if included in the public housing A & O Policy. | Betermination |
| | Schedule of flat rents offered at each public housing development. | Annual Plan: Rent |
| X | ☐ Check here if included in the public housing A & O Policy. | Determination |
| | Section 8 rent determination (payment standard) policies (if included in plan, not | Annual Plan: Rent |
| | necessary as a supporting document) and written analysis of Section 8 payment | Determination |
| X | standard policies. Check here if included in Section 8 Administrative Plan. | |
| | Public housing management and maintenance policy documents, including | Annual Plan: Operations |
| V | policies for the prevention or eradication of pest infestation (including cockroach | and Maintenance |
| X | infestation). Results of letest Public Housing Assessment System (DHAS) Assessment (or | Approach Diana Managarana |
| v | Results of latest Public Housing Assessment System (PHAS) Assessment (or | Annual Plan: Management |
| X | other applicable assessment). Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if | and Operations Annual Plan: Operations and |
| X | necessary) | Maintenance and |
| | 1,000,000 | Community Service & Self- |

| | D 1 / 1D1 ~ | |
|-------------------------------|---|--|
| Applicable & On Display | Supporting Document | Related Plan Component |
| | | Sufficiency |
| X | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations |
| X | Any policies governing any Section 8 special housing types ☑ Check here if included in Section 8 Administrative Plan | Annual Plan: Operations and Maintenance |
| X | Public housing grievance procedures Check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures |
| X | Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan. | Annual Plan: Grievance Procedures |
| X | The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year. | Annual Plan: Capital Needs |
| | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants. | Annual Plan: Capital Needs |
| | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing. | Annual Plan: Capital Needs |
| X | Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA). | Annual Plan: Capital Needs |
| X | Approved or submitted applications for demolition and/or disposition of public housing. | Annual Plan: Demolition and Disposition |
| | Approved or submitted applications for designation of public housing (Designated Housing Plans). | Annual Plan: Designation of Public Housing |
| | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937. | Annual Plan: Conversion of Public Housing |
| | Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion. | Annual Plan: Voluntary Conversion of Public Housing |
| | Approved or submitted public housing homeownership programs/plans. | Annual Plan: Homeownership |
| X | Policies governing any Section 8 Homeownership program (Section _23 of the Section 8 Administrative Plan) | Annual Plan: Homeownership |
| X | Public Housing Community Service Policy/Programs Check here if included in Public Housing A & O Policy | Annual Plan: Community Service & Self-Sufficiency |
| X | Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies. | Annual Plan: Community Service & Self-Sufficiency |
| | FSS Action Plan(s) for public housing and/or Section 8. | Annual Plan: Community Service & Self-Sufficiency |
| X | Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing. | Annual Plan: Community Service & Self-Sufficiency |
| | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing. | Annual Plan: Community Service & Self-Sufficiency |
| | Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). | Annual Plan: Pet Policy |
| X | ☑ Check here if included in the public housing A & O Policy. The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that | Annual Plan: Annual Audit |
| X | audit and the PHA's response to any findings. Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) |
| | Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection. | Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations |

| | | Grant Type and Number Capital Fund Program Gr Replacement Housing Fa | Federal FY of Grant: 2006 | | | | | | | | |
|---|---|--|---------------------------|-----------|----------|--|--|--|--|--|--|
| ☑ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:) ☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report Line No. Summary by Development Account Total Estimated Cost Total Actual Cost | | | | | | | | | | | |
| Line No. | Summary by Development Account | | | | | | | | | | |
| | | Original | Revised | Obligated | Expended | | | | | | |
| 1 | Total non-CFP Funds | | | | | | | | | | |
| 2 | 1406 Operations | \$5,000 | | | | | | | | | |
| 3 | 1408 Management Improvements | \$59,000 | | | | | | | | | |
| 4 | 1410 Administration | \$65,571 | | | | | | | | | |
| 5 | 1411 Audit | | | | | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | | | | | |
| 7 | 1430 Fees and Costs | \$5,000 | | | | | | | | | |
| 3 | 1440 Site Acquisition | | | | | | | | | | |
| 9 | 1450 Site Improvement | \$41,000 | | | | | | | | | |
| 10 | 1460 Dwelling Structures | \$374,000 | | | | | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | \$40,000 | | | | | | | | | |
| 12 | 1470 Nondwelling Structures | \$8,000 | | | | | | | | | |
| 13 | 1475 Nondwelling Equipment | \$26,000 | | | | | | | | | |
| 14 | 1485 Demolition | | | | | | | | | | |
| 15 | 1490 Replacement Reserve | | | | | | | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | | | | | | | |
| 17 | 1495.1 Relocation Costs | | | | | | | | | | |
| 18 | 1499 Development Activities | | | | | | | | | | |
| 19 | 1501 Collaterization or Debt Service | | | | | | | | | | |
| 20 | 1502 Contingency | | | | | | | | | | |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | \$623,571 | | | | | | | | | |
| 22 | Amount of line 21 Related to LBP Activities | · | | | | | | | | | |
| 23 | Amount of line 21 Related to Section 504 compliance | \$18,000 | | | | | | | | | |
| 24 | Amount of line 21 Related to Security – Soft Costs | | | | | | | | | | |
| 25 | Amount of Line 21 Related to Security – Hard Costs | | | | | | | | | | |
| 26 | Amount of line 21 Related to Energy Conservation Measures | \$322,000 | | | | | | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

| PHA Name: Greene Metropolitan Housing Authority | | Grant Type and Number Capital Fund Program Grant No: OH10P02250106 Replacement Housing Factor Grant No: | | | | | Federal FY of Grant: 2006 | | |
|---|---|---|---------|----------|------------|------------|---------------------------|-------------------|-------------------|
| Development Number Name/HA- Wide Activities | General Description of Major Work Categories | Dev. | Acct o. | Quantity | Total Esti | mated Cost | Total Actual Cost | | Status of Work |
| | | | | | Original | Revised | Funds Obligated | Funds Expended | |
| OH10P022001 | Concrete | 14 | 50 | | \$5,000 | | | | |
| | Electrical Upgrade | 14 | 60 | | \$15,000 | | | | |
| | Exterior Lighting | 14 | 50 | | \$3,000 | | | | |
| OH10P022002 | Smoke Detectors | 14 | 60 | | \$15,000 | | | | |
| | Exterior Lighting | 14 | 50 | | \$3,000 | | | | |
| OH10P022004 | Remodel Comm. Room | 14 | 70 | | \$8,000 | | | | |
| | Water Heater | 14 | 60 | | \$4,000 | | | | |
| | Closet Shelving | 14 | 60 | | \$6,000 | | | | |
| OH10P022005 | Exterior Doors | 14 | 60 | | \$15,000 | | | | |
| OH10P022010 | Flooring | 14 | 60 | | \$10,000 | | | | |
| OH10P022011 | Remodel Bathrooms | 14 | 60 | | \$15,000 | | | | |
| | Tree Trimming | 14 | 50 | | \$5,000 | | | | |
| OH10P022012 | Unit Rehab | 14 | 60 | | \$78,500 | | | | |
| | Appliances | 14 | 65. | | \$40,000 | | | | |
| | Furnaces | 14 | 60 | | \$15,000 | | | | |
| | Windows | 14 | 60 | | \$16,000 | | | | |
| OH10P022013 | Exterior Lighting | 14 | 50 | | \$1,000 | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages PHA Name: Greene Metropolitan Grant Type and Number Federal FY of Grant: 2006

| PHA Name: Greene Metropolitan Housing Authority | | Grant Type and Number Capital Fund Program Grant No: OH10P02250106 Replacement Housing Factor Grant No: | | | | | Federal FY of Gra | nt: 2006 | |
|--|---|---|------|----------|----------------------|---------|--------------------|-------------------|-------------------|
| Development Number Name/HA- Wide Activities | General Description of Major Work Categories | | Acct | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | | Original | Revised | Funds Obligated | Funds Expended | |
| | Exterior Concrete | 14 | 50 | | \$5,000 | | | | |
| OH10P022014 | Exterior Doors | 14 | 60 | | \$2,000 | | | | |
| | Tree Trimming | 14 | 60 | | \$5,000 | | | | |
| OH10P022015 | Water Heaters | 14 | 60 | | \$12,000 | | | | |
| | Tree Trimming | 14 | 50 | | \$2,000 | | | | |
| | Playground Equip. | 14 | 50 | | \$3,000 | | | | |
| OH10P022016 | Rehab Units | 14 | 60 | | \$78,500 | | | | |
| | Remodel Bathrooms | 14 | 60 | | \$25,000 | | | | |
| | Replace Windows | 14 | 60 | | \$50,000 | | | | |
| | Overhead doors | 14 | 60 | | \$1,000 | | | | |
| OH10P022017 | Exterior Concrete | 14 | 50 | | \$5,000 | | | | |
| | Landscaping | 14 | 50 | | \$4,000 | | | | |
| | Tree Trimming | 14 | 50 | | \$2,000 | | | | |
| | Energy Audit | 14 | 60 | | \$11,000 | | | | |
| OH10P022018 | Tree Trimming | 14 | 50 | | \$3,000 | | | | |
| PHA Wide | Maintenance Equip. | 14 | 75 | | \$1,000 | | | | |
| | Resident Job Training | 14 | 08 | | \$44,000 | | | | |

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

| PHA Name: Green Authority | Grant Type and Number Capital Fund Program Grant No: OH10P02250106 Replacement Housing Factor Grant No: | | | | | Federal FY of Grant: 2006 | | | |
|---|---|-----------|------------|----------|------------|---------------------------|--------------------|-------------------|-------------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. N | Acct o. | Quantity | Total Esti | mated Cost | Total Actual Cost | | Status of Work |
| | | | | | Original | Revised | Funds Obligated | Funds Expended | |
| PHA Wide | Staff Development | 14 | 08 | | \$5,000 | | | | |
| | Computer Software | 14 | 08 | | \$10,000 | | | | |
| | Non Tech Salaries | 14 | 10 | | \$20,571 | | | | |
| | Tech Salaries | 14 | 10 | | \$31,000 | | | | |
| | Employee Benefits | 14 | 10 | | \$14,000 | | | | |
| | Plan/Consulting | 14 | 30 | | \$5,000 | | | | |
| | Office furniture/equip. | 14 | 75 | | \$10,000 | | | | |
| | Comp. Equip/hardware | 14 | 75 | | \$15,000 | | | | |
| | Operations | 14 | 06 | | \$5,000 | | | | |
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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) **Part III: Implementation Schedule Grant Type and Number** PHA Name: Greene Metropolitan Federal FY of Grant:2006 Capital Fund Program No: OH10P02250106 **Housing Authority** Replacement Housing Factor No: Development All Fund Obligated All Funds Expended Reasons for Revised Target Dates (Quarter Ending Date) Number (Quarter Ending Date) Name/HA-Wide Activities Original Original Actual Revised Revised Actual OH10P022001 9/2008 9/2010 OH10P022002 9/2008 9/2010 OH10P022004 9/2008 9/2010 OH10P022005 9/2008 9/2010 OH10P022010 9/2008 9/2010 OH10P022011 9/2008 9/2010 OH10P022012 9/2008 9/2010 OH10P022013 9/2008 9/2010 OH10P022014 9/2008 9/2010 OH10P022015 9/2008 9/2010 OH10P022016 9/2008 9/2010 OH10P022017 9/2008 9/2010 OH10P022018 9/2008 9/2010 PHA Wide 9/2008 9/2010

| Annual Statemen | | | | - | | | |
|--------------------------------------|--|-----------------------|---|----------------------|-------------|------------|----------------------------------|
| Capital Fund Pro | _ | _ | und Prog | ram Replac | ement Housi | ing Factor | (CFP/CFPRHF) |
| Part III: Implem | entation S | | T 1 N | | | | Federal FY of Grant: |
| PHA Name: | | Capita | Type and Nur al Fund Progra cement Housir | rederal FY of Grant: | | | |
| Development | All | All Fund Obligated Al | | | | ed | Reasons for Revised Target Dates |
| Number Name/HA-Wide Activities | ber (Quarter Ending Date) (Quarter Ending Date) A-Wide | | | ite) | | | |
| Tion vities | Original | Revised | Actual | Original | Revised | Actual | |
| | 0 8 | | | 0.18 | 220,1200 | | |
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| Capital Fund Part I: Summan | _ | ve-Year Action Plan | | | |
|--|---------------------|------------------------------|----------------------------|---------------------------------------|------------------------------|
| PHA Name Greene Metropolitan Housing Authority | | | | ⊠Original 5-Year Plan □ Revision No: | 1 |
| Development Number/Name/ HA-Wide | Year 1 | Work Statement for Year 2 | Work Statement for Year 3 | Work Statement for Year 4 | Work Statement for Year 5 |
| | | FFY Grant: PHA FY: 2007 | FFY Grant: PHA FY: 2008 | FFY Grant: PHA FY: 2009 | FFY Grant: PHA FY: 2010 |
| 1406 | Annual Statement | \$5,000 | \$5,000 | ¢5,000 | ¢5 000 |
| 1408 | | \$59,000 | \$5,000 | \$5,000 \$59,000 | \$5,000 \$59,000 |
| 1410 | | | \$65,571 | | |
| | | \$65,571 | · · | \$65,571 | \$65,571 |
| 1430 | | \$5,000 | \$5,000 | \$5,000 | \$5,000 |
| 1450 | | \$34,000 | \$40,000 | \$58,500 | \$122,000 |
| 1460 | | \$391,000 | \$388,500 | \$406,600 | \$197,500 |
| 1465.1 | | \$45,700 | \$10,000 | \$15,000 | \$98,700 |
| 1470 | | 420.000 | \$87,000 | \$43,000 | \$13,000 |
| 1475 | | \$28,000 | \$29,000 | \$30,000 | \$60,000 |
| CFP Funds Listed for 5-year planning | | \$633,271 | \$689,071 | \$687,671 | \$625,771 |
| Replacement Housing Factor Funds | | | | | |

| Capital Fu | Capital Fund Program Five-Year Action Plan | | | | | | | | | | |
|-------------|--|-----------------------|-----------------------|----------------------------|-----------------|-----------|--|--|--|--|--|
| Part II: Su | pporting Pages—V | Vork Activities | | | | | | | | | |
| Activities | Activ | ities for Year:_2007_ | | Activities for Year: _2007 | | | | | | | |
| for | | FFY Grant: | | | FFY Grant: | | | | | | |
| | | PHA FY: | | | PHA FY: | | | | | | |
| Year 1 | | | 1 | | T | , | | | | | |
| | Development | Major Work | Estimated Cost | Development | Major Work | Estimated | | | | | |
| | Name/Number | Categories | | Name/Number | Categories | Cost | | | | | |
| See | OH10P022001 | Replace roofing | \$30,000 | OH10P022016 | Flooring | \$20,000 | | | | | |
| Annual | OH10P022002 | Entry door & locks | \$40,000 | | Concrete | \$10,000 | | | | | |
| | | Tree Trimming | \$4,000 | | | | | | | | |
| Statement | OH10P022004 | Landscaping | \$2,000 | | Rehab Unit | \$50,000 | | | | | |
| | | Concrete | \$4,000 | OH10P022017 | Appliances | \$18,700 | | | | | |
| | | Tree Trimming | \$2,000 | | Entry Doors | \$2,000 | | | | | |
| | OH10P022005 | Tree Trimming | \$4,000 | | Water Heaters | \$10,000 | | | | | |
| | | Flooring | \$15,000 | OH10P022018 | Concrete | \$4,000 | | | | | |
| | OH10P022010 | Exterior Doors | \$20,000 | PHA Wide | Maint. Equip. | \$3,000 | | | | | |
| | OH10P022011 | Appliances | \$10,000 | | Resident Job | \$44,000 | | | | | |
| | OH10P022012 | Flooring | \$28,000 | | Staff Devel. | \$5,000 | | | | | |
| | | Concrete | \$20,000 | | Comp. Software | \$10,000 | | | | | |
| | | Roofing | \$15,000 | | Salaries | \$51,571 | | | | | |
| | | Rehab Unit | \$75,000 | | Benefits | \$14,000 | | | | | |
| | OH10P022013 | Roofs | \$60,000 | | Plan/Consulting | \$5,000 | | | | | |
| | OH10P022014 | Flooring | \$6,000 | | Office Equip. | \$10,000 | | | | | |
| | OH10P022015 | Concrete | \$4,000 | | Comp. Hardware | \$15,000 | | | | | |
| | | Appliances | \$17,000 | | Operations | \$5,000 | | | | | |
| | Total CFP Estimated | | \$ | | | \$633,271 | | | | | |

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

| Part II: Supportin | Part II: Supporting Pages—Work Activities | | | | | | | | | | |
|--------------------|---|-----------------------|---------------------------|------------------|-----------------------|--|--|--|--|--|--|
| Ac | ctivities for Year :_2008 | 3 | Activities for Year: 2008 | | | | | | | | |
| | FFY Grant: | | | FFY Grant: | | | | | | | |
| | PHA FY: | | PHA FY: | | | | | | | | |
| Development | Major Work | Estimated Cost | Development | Major Work | Estimated Cost | | | | | | |
| Name/Number | Categories | | Name/Number | Categories | | | | | | | |
| OH10P022001 | Landscaping | \$2,000 | OH10P022013 | Emerg. Lighting | \$2,000 | | | | | | |
| | Rehab Bathrooms | \$70,000 | | Siding,Sof, Gut. | \$5,000 | | | | | | |
| OH10P022002 | Electrical Upgrade | \$20,000 | | Tree Trimming | \$2,000 | | | | | | |
| | Flooring | \$2,000 | OH10P022014 | Rehab Bath. | \$5,000 | | | | | | |
| OH10P022004 | Flooring | \$4,000 | OH10P022015 | Flooring | \$45,000 | | | | | | |
| | Water Piping | \$5,000 | OH10P022016 | Exterior Doors | \$10,000 | | | | | | |
| | Patio Doors | \$10,000 | | Landscaping | \$5,000 | | | | | | |
| | Ceiling Tile | \$3,000 | | Appliances | \$10,000 | | | | | | |
| OH10P022005 | Rehab | \$50,000 | | Sewer Line | \$2,000 | | | | | | |
| OH10P022010 | Tree Trimming | \$2,000 | | Replace Furn. | \$10,000 | | | | | | |
| | Rehab Bathrooms | \$37,500 | OH10P022017 | Concrete | \$5,000 | | | | | | |
| OH10P022011 | Landscaping | \$4,000 | | Flooring | \$10,000 | | | | | | |
| OH10P022012 | Sewer Lines | \$5,000 | | Furnaces | \$3,000 | | | | | | |
| | Remove Oil Tanks | \$8,000 | OH10P022018 | Landscaping | \$2,000 | | | | | | |
| | Rehab Bathrooms | \$15,000 | PHA Wide | Maint. Equip. | \$4,000 | | | | | | |
| | Reseal Driveways | \$2,000 | | Maint. Shop | \$85,000 | | | | | | |
| | Rehab Unit | \$75,000 | | Resid. Training | \$44,000 | | | | | | |
| | Landscaping | \$5,000 | | Staff Training | \$5,000 | | | | | | |
| OH10P022013 | Flooring | \$5,000 | | Comp. Software | \$10,000 | | | | | | |
| Total CFP Es | stimated Cost | \$ | | | \$ | | | | | | |

| Capital Fu | nd Program Five-Y | Year Action Plan | | | | | |
|-------------|------------------------|------------------------|-----------------------|----------------------|------------|-----------|--|
| Part II: Su | pporting Pages—V | Vork Activities | | | | | |
| Activities | Activ | ities for Year :_2008 | | Activities for Year: | | | |
| for | | FFY Grant: | | | FFY Grant: | | |
| | | PHA FY: | | | PHA FY: | | |
| Year 1 | | | | | | | |
| | Development | Major Work | Estimated Cost | Development | Major Work | Estimated | |
| | Name/Number | Categories | | Name/Number | Categories | Cost | |
| See | Non Tech Salaries | \$20,571 | | | | | |
| Annual | Tech Salaries | \$31,000 | | | | | |
| Statement | Benefits | \$14,000 | | | | | |
| | Plan/Consulting | \$5,000 | | | | | |
| | Comp. Equip. | \$15,000 | | | | | |
| | Office Equip. | \$10,000 | | | | | |
| | Operations | \$5,000 | | | | | |
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| To | tal CFP Estimated Cost | t \$689 . 071 | \$ | | | \$ | |

| Capital Fund Program Five-Year Action Plan |
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| Part II: Supporting Pages—Work Activities |

| Part II: Supportin | g Pages—Work A | ctivities | | | | | |
|--------------------|----------------------|-----------------------|---------------------------|-----------------|-----------------------|--|--|
| Ac | tivities for Year:20 | 09 | Activities for Year: 2009 | | | | |
| | FFY Grant: | | | FFY Grant: | | | |
| | PHA FY: | | PHA FY: | | | | |
| Development | Major Work | Estimated Cost | Development | Major Work | Estimated Cost | | |
| Name/Number | Categories | | Name/Number | Categories | | | |
| OH10P022001 | Exterior Doors | \$20,000 | OH10P0220012 | Cabinets | \$10,000 | | |
| | Comm. Rm. Lighting | \$3,000 | | Windows | \$10,000 | | |
| | Windows | \$5,000 | | Tree Trimming | \$5,000 | | |
| | Flooring | \$5,000 | | Rehab unit | \$50,000 | | |
| OH10P022002 | Pave Parking Lot | \$15,000 | | Overhead Doors | \$2,000 | | |
| | Roofing | \$45,000 | OH10P0220013 | Furnaces | \$21,600 | | |
| | Windows | \$44,000 | | Play Equp. | \$5,000 | | |
| OH10P022004 | Retaining wall | \$10,000 | OH10P0220014 | Postal Boxes | \$3,000 | | |
| | Replace Boil/Chill | \$40,000 | | Lighting | \$3,000 | | |
| OH10P022005 | Concrete | \$10,000 | | Tree Trimming | \$2,000 | | |
| | Kit. cabinets | \$15,000 | OH10P0220015 | Play Equip. | \$1,000 | | |
| | Water Heaters | \$10,000 | OH10P0220016 | Tree Trimming | \$2,500 | | |
| | Overhead Doors | \$2,000 | | Roofing | \$15,000 | | |
| OH10P022010 | Furnaces | \$35,000 | | Cabinets | \$10,000 | | |
| | Concrete | \$10,000 | | Rehab unit | \$20,000 | | |
| OH10P0220011 | Cabinets | \$32,000 | OH10P0220017 | Play Equip. | \$2,000 | | |
| | Flooring | \$5,000 | | Gutter/Spouting | \$5,000 | | |
| | Concrete | \$4,000 | | Cabinets | \$25,000 | | |
| OH10P0220012 | Flooring | \$20,000 | | Fencing | \$1,000 | | |
| Total CFP Es | timated Cost | \$ | | | \$ | | |

| Capital Fu | nd Program Five- | Year Action Plan | | | | | |
|-------------|---------------------|------------------------|-----------------------|----------------------|------------|-----------|--|
| Part II: Su | pporting Pages— | Work Activities | | | | | |
| Activities | Activ | vities for Year :2009_ | | Activities for Year: | | | |
| for | | FFY Grant: | | | FFY Grant: | | |
| | | PHA FY: | | | PHA FY: | | |
| Year 1 | | T | 1 | | 1 | T | |
| | Development | Major Work | Estimated Cost | Development | Major Work | Estimated | |
| | Name/Number | Categories | | Name/Number | Categories | Cost | |
| See | PHA Wide | Maint. Equip. | \$5,000 | | | | |
| Annual | | Resident Job Training | \$44,000 | | | | |
| Statement | | Staff Develop. | \$5,000 | | | | |
| | | Comp. Software | \$10,000 | | | | |
| | | Non Tech. Sal. | \$20,571 | | | | |
| | | Tech. Salaries | \$31,000 | | | | |
| | | Benefits | \$14,000 | | | | |
| | | Plan/consulting | \$5,000 | | | | |
| | | Office Equip | \$10,000 | | | | |
| | | Comp. Equip | \$15,000 | | | | |
| | | Operations | \$5,000 | | | | |
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| | Total CFP Estimated | d Cost | \$\$687,671 | | | \$ | |

| Capital Fund Program Five-Year Action Plan |
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| Part II: Supporting Pages—Work Activities |

| Part II: Supporting Pages—Work Activities | | | | | | | | | | | |
|---|--------------------------|----------|---|------------------|----------|-------------|------------|-----------------------|-------------|------------|-----------------------|
| Activities for Year :_2010 FFY Grant: PHA FY: | | | Activities for Year: _2010 FFY Grant: PHA FY: | | | | | | | | |
| | | | | | | Development | Major Work | Estimated Cost | Development | Major Work | Estimated Cost |
| | | | | | | Name/Number | Categories | | Name/Number | Categories | |
| OH10P022001 | Tree Trimming | \$2,000 | OH10P022013 | Concrete | \$15,000 | | | | | | |
| | AC Comm. Room | \$2,000 | | Tree Trimming | \$2,000 | | | | | | |
| | Concrete | \$10,000 | | Patio Fencing | \$6,000 | | | | | | |
| | Replace Boilers | \$15,000 | | Appliances | \$28,000 | | | | | | |
| OH10P022002 | Water heaters | \$20,000 | | Storm Doors | \$5,000 | | | | | | |
| | Tree Trimming | \$2,000 | OH10P022014 | Concrete | \$10,000 | | | | | | |
| | Landscaping | \$5,000 | | Appliances | \$15,000 | | | | | | |
| | Appliances | \$40,000 | | Call Aid Station | \$4,000 | | | | | | |
| OH10P022004 | Pave parking lot | \$10,000 | OH10P022015 | Tree Trimming | \$5,000 | | | | | | |
| | Landscaping | \$2,000 | OH10P022016 | Windows | \$25,000 | | | | | | |
| OH10P022005 | Pave driveways | \$15,000 | | Fencing | \$6,000 | | | | | | |
| | Exterior Doors | \$5,000 | | Site grading | \$5,000 | | | | | | |
| OH10P022010 | Replace roofs | \$40,000 | OH10P022017 | Tree Trimming | \$4,000 | | | | | | |
| | Appliances | \$15,000 | OH10P022018 | Overhead doors | \$3,500 | | | | | | |
| OH10P022011 | Tree Trimming | \$4,000 | PHA Wide | Insulation | \$5,000 | | | | | | |
| OH10P022012 | Concrete | \$15,000 | | Replace Furn. | \$6,000 | | | | | | |
| | Tree Trimming | \$4,000 | | Appliances | \$700 | | | | | | |
| | Rehab Unit | \$75,000 | | Staff Car | \$25,000 | | | | | | |
| | Overhead Doors | \$5,000 | | Main. Equip. | \$10,000 | | | | | | |
| Total CFP Es | Total CFP Estimated Cost | | | | \$ | | | | | | |

| Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities | | | | | | | |
|---|-----------------------|-----------------------|---|-----------------------|-----------------------|--|--|
| Activities for Year :2010 FFY Grant: PHA FY: | | | Activities for Year: FFY Grant: PHA FY: | | | | |
| Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | | |
| PHA Wide | Resident Job Training | \$44,000 | | 8 | | | |
| | Staff Development | \$5,000 | | | | | |
| | Computer Soft. | \$10,000 | | | | | |
| | Non Tech. Sal. | \$20,571 | | | | | |
| | Tech. Salaries | \$31,000 | | | | | |
| | Benefits | \$14,000 | | | | | |
| | Plan/Consulting | \$5,000 | | | | | |
| | Office Equip. | \$10,000 | | | | | |
| | Comp. Equip. | \$15,000 | | | | | |
| | Operations | \$5,000 | | | | | |
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| Total CFP Estimated Cost | | \$625,771 | | | \$ | | |